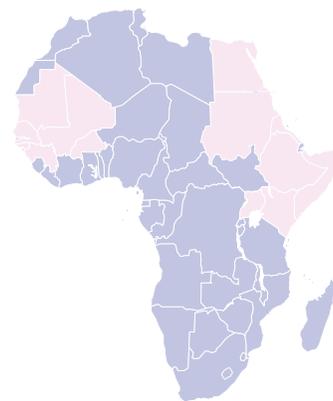




**JOINT EVALUATION
UNFPA-UNICEF JOINT PROGRAMME ON
FEMALE GENITAL MUTILATION/CUTTING:
ACCELERATING CHANGE
(2008 - 2012)**



This independent evaluation was conducted in 2012/2013, as a joint exercise by the evaluation offices of UNFPA and UNICEF. It was undertaken by a team from Universal Management Group, under the supervision and guidance of a joint evaluation management group composed of members of the evaluation offices of both agencies. The evaluation aimed to assess the extent to which and under what circumstances the UNFPA-UNICEF joint programme had accelerated the abandonment of FGM/C in the 15 programme countries over the last five years. Its outputs are a synthesis report and four country case studies for Burkina Faso, Kenya, Senegal, and Sudan.



Context

More than 125 million girls and women alive today worldwide have undergone some form of FGM/C and are living with its consequences, and as many as 30 million girls are at risk of being cut over the next decade. To date, the practice of FGM/C is concentrated in 29 countries in Africa and the Middle East.

The joint programme

The objective of the joint programme was to help reduce the practice of FGM/C among girls aged zero -15 by 40 per cent, and eliminate FGM/C altogether in at least one country by 2012.

The originally planned five-year duration of the joint programme (2008-2012) was extended in 2011 for an additional year. While the originally estimated budget for the joint programme was 44 million dollars, the latest estimated budget is 37 million dollars (US\$). This shortfall meant that instead of the originally envisaged 17 countries, only 15 participated in the joint programme.

The 15 countries joined the programme at different times: **2008**: Djibouti, Egypt, Ethiopia, Guinea, Guinea-Bissau, Kenya, Senegal and Sudan; **2009**: Burkina Faso, Gambia, Uganda and Somalia; **2011**: Eritrea, Mali and Mauritania

Overall assessment

Evaluation data indicate that the joint programme has positively contributed to change processes at the global, national, and community levels. However, the extent to which the joint programme has contributed to accelerating FGM/C abandonment can only be assessed in the longer term.

Key strengths of the joint programme design were its focus on influencing collective change and working holistically, e.g. by simultaneously supporting interventions at global, regional, national and local levels. The joint mechanism allowed the programme to tap into the strengths and networks of both UNFPA and UNICEF. Its design reflected the understanding that FGM/C is a violation of the human rights of girls and women, yet it addressed this in culturally sensitive ways, recognizing the strong cultural value that FGM/C holds in many contexts. UNFPA and UNICEF faced some challenges in fully operationalizing this overall design, in particular implementing the envisaged regional component.

Strengthening national enabling environments for FGM/C abandonment

Strengthening the commitment and capacity of national actors

UNFPA and UNICEF jointly engaged with a broad range of national actors at central and decentralized levels, supporting their existing efforts to eliminate FGM/C, and increasing their awareness of the issue. Many of these actors demonstrated a strengthened **commitment** to ending the practice through public statements, actions such as the creation of FGM/C-related legislation and the strengthening of institutions responsible for its implementation, or their involvement in the development of national or sector-specific action plans and strategies. The joint programme significantly contributed to strengthening national **capacity** to address FGM/C, in particular by helping to improve and systematize coordination of relevant actors at national and decentralized levels. In all 15 countries, it also helped enhance national capacities for FGM/C-related prevention and response, including for monitoring of relevant data.

Strengthening legal and policy instruments

In most programme countries, the joint programme contributed to creating or enhancing national or decentralized laws, policies, plans and programmes for the abandonment of FGM/C. In several cases, the **process** of advocating for a new law or policy constituted a result in its own right, as it created an opportunity for jointly convening a diverse set of actors. These were capable of representing and influencing a range of constituencies, and formulating complementary arguments for abandoning the practice. The evaluation also emphasized the importance of the **timing** of efforts aiming to influence legislation, e.g. the need to ensure sufficiently strong support among relevant actors before proposing legislative changes.

Through the joint programme, UNFPA and UNICEF also supported the use and enforcement of existing laws and policies for FGM/C abandonment. Despite some successes, effective implementation remains a challenge in most countries due to a lack of appropriate resources, limitations in the capacity of law-enforcement agents, and geographic constraints in remote areas. Nevertheless, the existence of a law prohibiting FGM/C gives activists an important reference point and legitimizes their advocacy work.

Strengthening FGM/C-related capacities in the health sector

In all programme countries, the joint programme worked closely with the respective Ministry of Health and other relevant institutions to integrate issues of FGM/C prevention, response and tracking in health sector-specific programmes and plans. It made considerable contributions to training the medical staff of health facilities, and influenced the integration of FGM/C-related components into the pre-service and in-service training of doctors and midwives. Also, in several countries, baseline and other studies conducted by the joint programme generated evidence of the rising medicalization of the practice, which later informed advocacy work.

Fostering local-level commitment to abandon FGM/C

Types of contributions to results

In all 15 programming countries, the joint programme helped strengthen local-level commitment to abandon FGM/C. Noted results include changes in community members' awareness and knowledge of FGM/C; an increase in the visible/explicit commitment to abandon FGM/C by community leaders and members; and changes in the public discourse about FGM/C indicating that the practice was increasingly losing its status as a taboo topic. The evaluation also found examples of families and former circumcisers self-reporting their abandonment of FGM/C in the recent past.

Giving visibility to FGM/C abandonment

In an effort to bring about collective change, the joint programme facilitated events in almost all programming countries during which community leaders and/or members publicly declared their commitment to abandoning FGM/C. Since 2008,

Public declarations: The joint programme used various ways of translating the concept of public commitment into practice, including: i) community (village)-level declarations following longer-term processes of community dialogue and education involving community leaders and a wide range of male and female community members; ii) declarations by acknowledged community leaders that carried the weight of customary law and/or carried the threat of social sanctions against perpetrators of FGM/C; and iii) ad-hoc public pledges and signings at events such as concerts, or in healthcare facilities.



when the joint programme was established, nearly **10,000 communities representing about 8 million people have renounced the practice**. In communities where FGM/C was considered a rite of passage (e.g. in parts of Kenya and Uganda), the joint programme and its implementing partners supported community efforts to organize Alternative Rites of Passage (ARP) which maintained a mechanism to preserve and pass on beneficial cultural values to the next generation. While the joint programme did not invent ARP, it allowed its implementing partners to expand and improve their use by involving the whole community in a collective movement to support the girls' graduation without cutting.

While public declarations do not guarantee behavioural change and a corresponding decline in FGM/C, they are likely to have some positive influence on existing social norms surrounding the practice by creating social pressure on those who have taken a pledge (especially community leaders). Moreover, declarations contribute to the ongoing public discourse on FGM/C and can influence perceptions of what views and actions are socially acceptable.

However, the evaluation found little information on specific changes that may have occurred in collective and individual behaviours following public declarations, as well as on factors facilitating or hindering change in each case. This was partly due to the fact that many of the public declarations supported by the joint programme were recent. In addition, resource limitations often prevented implementing partners from conducting systematic, ongoing follow-up and/or monitoring of changes subsequent to public declarations.

Fostering partnerships *Engaging with a wide range of (potential) agents of change*

In all 15 countries, specific programming choices were informed and guided by the overall joint programme approach, but were tailored to the respective national and/or local contexts. One characteristic common to all 15 countries was the attempt to engage with a wide range of partners and agents of change at national and community

levels. The joint programme helped mobilize public authorities, respected traditional and religious leaders, national and local media, teachers and health workers, the legal professions and artists and musicians to influence public discourse on FGM/C. Complementary messages that stated the many different reasons for the abandonment of FGM/C, including arguments based on health, law, rights, religion, traditional values and social desirability, were used to raise awareness about FGM/C and to encourage its abandonment. While evaluation data do not permit an assessment of which strategies (or combinations thereof) are the most effective or cost-efficient, they strongly support the use of a varied toolbox of complementary strategies and entry points to influence social change.

The Saleema Initiative (Sudan)

The joint programme supported strategies aiming to reframe FGM/C-related concepts, values and traditions by building on existing positive values and community needs. In Sudan, for example, it incorporated efforts under the "Saleema" initiative, which had grown out of the recognition that there was no positive term for an uncircumcised woman or girl in colloquial Sudanese Arabic. The Arabic word "Saleema" (meaning "whole", "healthy in body and mind", "unharméd", "pristine", and "in a God-given condition") fills this linguistic and conceptual gap.

Involving traditional and religious leaders and networks

In all countries, the joint programme made efforts to secure the support and commitment from religious and/or traditional community leaders to abandon FGM/C. In some geographic areas, the assurance that FGM/C was not a religious obligation, but was actually a violation of core values promoted by the respective religion, was a necessary condition for changes in the practice. Similarly, traditional leaders, such as community elders, often acted as influential advocates for FGM/C abandonment.

Advancing the social norms perspective

The focus of the joint programme on facilitating collective, rather than individual, change was rooted in its theoretical understanding of FGM/C as a social norm derived from recent studies. The understanding that FGM/C is upheld by

a social norm guides the analysis of why FGM/C persists and how it can be abandoned.

What is a social norm? A social norm is a social rule of behaviour that members of a community follow in the belief that it is expected by others. Simply put, the practice continues because individuals are concerned with whether others will approve or disapprove of their actions, and whether there will be sanctions or consequences for those actions.

Evaluation data allow validation of the two initial stages of the theory of change underlying the joint programme, i.e. from i) changes in access to services, legal/policy frameworks, individual and collective knowledge and attitudes, and changes in public discourse on FGM/C; to ii) changes in social norms relevant to FGM/C. Data gaps exist, however, in the transition from changes in social norms to changes in individual and collective behaviours (stage iii), and, from there, to changes in FGM/C prevalence (stage iv). While evaluation findings do not undermine the soundness of the theory of change underlying the joint programme, they highlight the need for further and longer-term monitoring, evaluation and analysis in order to support all aspects of this theory of change with evidence.



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Main Conclusions

The joint programme has helped accelerate existing change processes towards FGM/C abandonment at national, sub-national and community levels, and has contributed to strengthening the momentum for change at the global level. While some achievements are likely to be sustained without additional support, further efforts are needed to turn existing potentials into actual changes in behaviours.

Factors that have negatively affected performance and that threaten the sustainability of results include the influence of conservative groups opposing FGM/C abandonment often due to religious and/or political reasons (which is growing in some countries); and the often limited financial and human resources available to national partners for continuing or expanding existing efforts.

Available human and financial resources of the joint programme were adequate in light of its catalytic nature, but insufficient in view of the existing needs, expectations and absorptive capacity of the programming countries. The lack of predictability of funds limited the potential for using available resources effectively and efficiently. In addition, the work of the two agencies and

their partners were limited by the annual planning, budgeting and reporting cycle, limiting their ability to engage in consistent and longer-term implementation.

While efforts of coordination between the two agencies have associated transaction costs, these were outweighed by the benefits and added value of the joint programme structure. Coordination worked well in general, particularly at the global level and, to varying degrees, at the country level.

The implementation of the joint programme reflected the theoretical assumptions on which it was based, and helped validate some of these assumptions. At the same time, a knowledge and evidence gap remains, as regards the transition from changes in social norms to visible changes in individual and collective behaviours and, in the long term, a decrease in FGM/C prevalence.

Sustaining the momentum

By integrating the joint programme approach into national initiatives; establishing and strengthening partnerships at national and decentralized levels; and strengthening national ownership, capacity and leadership for FGM/C abandonment, the joint programme helped create conditions favourable to the continuation and expansion of existing efforts. At the community level, the existing momentum for change is, to some extent, likely to be self-perpetuating, given that community members (in particular leaders) would risk negative reactions if they acted against their publicly-stated commitments. At the same time, longer-term follow-up and support are required to ensure that the existing potential for sustainable behaviour change is transformed into practice.



Recommendations to UNFPA, UNICEF and their partners

- Pursue a second phase of the joint programme building upon the achievements and lessons from the first phase and maintaining the catalytic nature of the joint support.
- Continue to help strengthen the commitment and capacity of duty bearers at central and decentralised levels, and support the strengthening of government systems for FGM/C abandonment. Maintain efforts to involve non-governmental change agents to foster local-level commitment within practising communities.
- Operationalize and test assumptions on the benefits of cross-community and cross-border dynamics for change, given that this regional aspect was not fully translated into practice during the first phase of the joint programme.
- Ensure that the FGM/C-related components of the UNFPA and UNICEF regular country programmes reflect the existing global consensus on the use of a holistic and culturally sensitive approach to FGM/C abandonment.
- Engage with existing or potential donors interested in contributing to FGM/C-abandonment work and advocate for predictable, longer-term financing.
- Take action to further strengthen individual and joint systems, tools, capacities, and resources for monitoring and reporting on progress towards results.
- Jointly or separately, invest in more in-depth research on social norms change and its linkages to changes in individual and collective behaviour



Evaluation Office



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